

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-579)**

SERIAL NO.
658623
APPLICANT'S

FILING DATE
9-8-00

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	WFO.	DEF.	WFO.	DEF.	WFO.	DEF.
1						
2						
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49						
50						
TOTAL WFO.	2					
TOTAL DEF.						

	WFO.	DEF.	WFO.	DEF.	WFO.	DEF.
61						
62						
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TOTAL WFO.						
TOTAL DEF.						